Living Water Church Ministry Training Center Bible Study Financial Aid Application

Applicant	t's Name		
Bible Cou	irse of Study		
Personal	Study	Associate's Degree	Bachelor's Degree
Mailing Address		City	
State	Zip Code	Phone Number	E-mail
What cla	ass are you enro	lling in for which you are reque	esting financial aid?
How mu	ch can you cont	ribute toward the tuition cost o	of this class?
CONDITIO	ONS OF AWARD		
		turned in three (3) weeks prior will not be considered.	to class. If application is late or
Applican	t will be notified	d of status of financial aid one v	week prior to beginning of class.
Financia	l aid is depende	nt upon available funding at tin	ne of request.
Financial		lass. If additional aid is needed	l another application will need to be
Commen	ts:		
		lication and verify that all infor d and agree with the condition	mation is correct to the best of my s herein.
Applicant	Applicant's Signature Date		
Date Rec	eived	By	
Application	on Reviewed by: _		Amount Awarded: